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ABSTRACT

Contemporary literature on shyness has made steady progression over the last 20 years in theoretical, methodological, and clinical sophistication; however, little research has investigated how shyness is experienced by shy individuals. The purpose of the present study was to gain a more in-depth understanding of shyness as experienced by shy individuals. The extended written comments of shy individuals regarding problems caused by their shyness were subjected to content analysis. Participants (N=154) were randomly selected from more than 800 individuals completing a shyness survey, which appeared in the November/December 1995 issue of "Psychology Today." Respondents answered the question: "Describe what problems your shyness has created for you in your personal, social, and/or professional life." Responses were read and categorized by four raters. Data is presented in a table summarizing frequency of self-reported problem areas. A content analysis revealed five major shyness problem areas, including eight subcategories: (1) interpersonal (casual, social, and intimate); (2) professional (intrapersonal, interpersonal, and problems with authority); (3) intrapersonal (affective and psychosomatic); (4) educational; and (5) other. Discussions of the use of self-selected strategies to overcome shyness and the treatment implications of the results are also presented. (EMK)

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Running Head: PAINS AND PROBLEMS OF SHYNESS

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Identifying the Pains and Problems of Shyness: A Content Analysis

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Abstract

The purpose of the present study was to assess the extended written comments of shy individuals regarding problems caused by their shyness. The 154 participants were randomly selected from over 800 individuals completing a shyness survey appearing in the Nov.\Dec. 1995 Psychology Today. A content analysis revealed five major shyness problem areas, including 8 subcategories: interpersonal (casual, social, & intimate), professional (intrapersonal, interpersonal, and problems with authority), and intrapersonal (affective and psychosomatic), educational, and an "other" category. A discussion of the use of self-selected strategies to overcome shyness and the treatment implications of the results are also presented.

Identifying the Pains and Problems of Shyness:

A Content Analysis

Within the last twenty years, the contemporary literature on shyness represents a steady progression of development characterized by an increasing level of theoretical, methodological, and clinical sophistication (cf. Carducci & Zimbardo, 1995; Jones, Cheek, & Briggs, 1986; Zimbardo, 1977). However, much of this research to date has involved fixed-format questionnaires, which offer the respondents little room for personal expression, and the study of primarily college students. While much has been gained through the use of the questionnaire approach and the study of college students, this approach lacks a certain degree of ecological validity and has been the source of some debate in the literature. A principal argument in this debate is the extent to which this approach used by researchers to study the definition, causes, and treatment of shyness reflects the actual nature of how shyness is experienced by shy individuals in their everyday lives (Harris, 1984a, 1984b; Cheek & Watson, 1989). In response to such concerns, the purpose of the present study was to gain a more in-depth understanding of shyness by performing a content analysis of the extended written responses from shy individuals describing in their own words how shyness is a problem in various aspects of their lives.

Methods

Participants

The 154 participants (43 males and 109 females, with two respondents failing to indicate gender, ranging in age from 14 to 70 years of age) completed a shyness survey appearing in the Nov.\Dec. 1995 issue of Psychology Today (Carducci & Zimbardo, 1995). The respondents, who represented a variety of educational levels and ethnic backgrounds, were randomly selected

from a larger sample of over 800 respondents who returned the surveys. As part of the survey, all of the participants were assured confidentiality of their responses.

Materials

The 1995 Psychology Today Survey on Shyness (Carducci & Zimbardo, 1995) consisted of ten fixed-format items and five open-ended questions. Examples of the fixed-format questions include: Do you consider yourself to be a shy person? (yes; no), How often do you experience (or have you experienced) feelings of shyness? (every day; almost everyday; often, nearly every other day; once or twice a week; occasionally, less than once a week; rarely, once a month or less), and Do you think your shyness can be overcome? (yes; no; uncertain). The open-ended questions requested the participants to describe what factors contributed to their shyness, how their shyness was expressed, problems their shyness caused, what they had tried to do to overcome shyness, and anything else they would like to report about their shyness.

Results

Because of the rather large number of responses to the open-ended items, only the responses to the item, "Describe what problems your shyness has created for you in your personal, social, and/or professional life" were examined. The extended written responses were read and categorized by four raters.

Content Analysis

The content analysis of the surveys revealed 5 general problem areas: interpersonal, professional, intrapersonal, educational, and an "other" category. Within these 5 general categories, eight total subcategories were also identified. The interpersonal problem area included the subcategories of casual (e.g., meeting new people), social (e.g., dating), and intimate (e.g.,

long-term relationships and marriage). The professional problem areas include the subcategories of intrapersonal (e.g., lacking confidence), interpersonal (e.g., problems interacting with co-workers and clients), and problems with authority (e.g., making requests of supervisors). The intrapersonal area included the subcategories of affect (e.g., feelings of anxiety and emotional discomfort) and psychosomatic (e.g., indigestion, tremors, and substance abuse). The educational (e.g., difficulty speaking up in class) and other (e.g., can't dance in public, stage fright) did not have any subcategories.

Frequency Analysis

A summary of the extent to which the respondents indicated problem areas of shyness is presented in Table 1. The greatest problem area of shyness indicated was the interpersonal casual subcategory. Clustering together as the second most frequently occurring problem areas were the interpersonal social and intrapersonal affective subcategories. Forming the third most frequent problem areas of shyness were the intrapersonal and interpersonal professional subcategories. The forth cluster of problem areas of shyness included the other and educational categories and the intrapersonal psychosomatic subcategory. A fifth cluster included the dealing with authority and interpersonal intimacy subcategory problem areas. Further analysis revealed that 31.2% (n = 48), 37.0 (n = 57), and 18.8 (n = 29) of the respondents indicated that shyness was a problem in one aspect, two aspects, or three aspects of their lives, respectively, while 12.9 (n = 20) indicated that shyness was a problem in four or more aspects of their lives.

Discussion

The results of the content analysis seem to provide both good news and bad news regarding the problems created by shyness. The bad news is that, as expected, shyness seems to

have its most problematic impact on shy individuals as they are trying to make friends and during the process of dating. The good news is that when in an intimate relationship, shyness does not seem to be a problem for most shy individuals. In the work setting, problems of shyness seem to be the self-doubt and critical self-evaluation experienced by shy individuals and the problems their shyness creates while they are interacting with co-workers and clients. Within the shy individual, the biggest problem created by their shyness is feelings of anxiety and affective discomfort.

The results of the present study might also help us to understand how shy individuals make decisions about what to do to overcome their shyness. For example, in an attempt to make new friends, date, and interact more successfully with their co-workers and clients, shy individuals may engage in the process of self-induced extraversion (Carducci, Marion, Lynch, Dosch, & Boley, 1997). With this strategy, shy individuals force themselves to be in the social proximity of others (e.g., go to bars, dances, offices parties). Unfortunately, certain intrapersonal difficulties involving feelings of anxiety and self-doubt can interfere with the shy person's ability to perform successfully in the situations of self-induced extraversion. For example, while attending an office party, a shy individual may become self-conscious, anxious, and tongue-tied and is unable to contribute to the on-going conversation.

The results of the present study also have implications for the treatment of shyness (cf. Pilkonis, 1986). For those shy individuals whose problems with shyness are primarily intrapersonal in nature, they might benefit most from individualized treatment programs that involve relaxation training to reduce anxiety or cognitive modification to help minimize feelings of self-doubt. For those whose problems with shyness are primarily interpersonal in nature, they might benefit most from group treatment programs that emphasize social skills straining and social support.

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Table 1

Frequency Summary of the Content Analysis of Self-Reported Problem Areas of Shyness*

Problem Areas	Percent Responding
Interpersonal	
Casual	58 (89)
Social	41 (63)
Intimate	7 (11)
Professional	
Intrapersonal	20 (31)
Interpersonal	20 (31)
Problems with authority	8 (12)
Intrapersonal	
Affect	31 (48)
Psychosomatic	12 (18)
Educational	10 (15)
Other	13 (20)

*Number of respondents given in parenthesis (N = 154).